Name of Applicant/s _____

Home site Address: _____

Lot #: _____

Logan's Crossing Manufactured Home Community

Application for Residency 2021

150 McPherson Parkway
Dallas, Georgia 30157
Phone: 770-443-6170 Office & Fax
Email: LogansCrossingMHC@gmail.com
Web: www.LogansCrossing.com

LOT RENTAL RATES

Application Fee	$50.00 (non-refundable)
Earnest Money Deposit for Lot	$200.00 (refundable)
Lot Rental Rate	$425.00 per month
Monthly Water/Sewer/Trash	$23.00 base rate plus $21.29 per 1000 gallons of metered service

Checklist of items needed to process the application

- Completed application with $50.00 application fee
- Employment Verification Form – Sign only - We will fax this to your Employer
- Rental History Verification Form – Sign only – We will fax this to your Landlord

PLEASE BRING THESE ITEMS:

- 2 years of tax returns with W2s
- 2 full months of bank statements
- 4 weeks of paystubs
- Picture ID of all applicants and occupants

If applicable:

- Child support documentation
- Alimony documentation
- Other _____

My credit score is about _____. I hereby pledge to begin working immediately on improving my credit score, and will review my progress with Logan's Crossing, every 6 months, until my credit score exceeds 700.

_____ _____

Applicant Signature Date

_____ _____

Co-Applicant Signature Date

Qualifying Criteria for Residency

Equal and Fair Housing: We do not discriminate on the basis of race, color, religion, sex, disability familial status or national origin.

Availability: Applicants for home sites will be accepted on a first come, first serve basis and are subject to availability of the home site requested.

Rental Applications: Rental applications must be completed by each applicant (defined as all residents to be identified in the lease as the person or persons responsible for paying the rent). Original Government Issued photo identification is required for all occupants and a copy will be made when the application is submitted or at move-in and kept in the resident's file.

In approving an applicant for residency, the following criteria must be met:

Rental History: **TWO** years of verifiable history on current and/or previous addresses. Applicant must provide a lease and a rental receipt if rental is or was from a private owner. An applicant may not have any unresolved debts to a current or previous landlord/ mortgagor. The following will be cause for rejection as a result of information gathered from prior landlords: repeated disturbance of neighbor's peace; reports of unsavory or illegal activity (drugs, gambling, etc.); damage beyond normal wear and tear; reports of violence or threats to neighbors or landlord; allowing persons not on lease to reside at leased premises; failure to give proper notice before moving; failure to make timely and current rental/mortgage payments; past due balance on rental account which has been reported to credit bureau.

Employment: Each applicant must have verifiable current employment and **TWO** years of employment history or verifiable source of income. Full time students may require a guarantor, proof of enrollment or graduation. Self-employed individuals must provide a financial statement from a CPA and/or TWO previous year's tax return.

Income: Gross income per individual or married couple must be three (3) times the amount of market rent and home payment. Roommates must qualify individually and are required to make three (3) times the amount of market rent. If not verifiable per their employer, Logan's Crossing will require a copy of the previous year's tax return filed with the IRS or the past six- (6) months of paystubs or bank statements.

Guarantor: A guarantor must complete an application and meet the leasing criteria and must make five (5) times the home site and house payment rate in a monthly verifiable income.

Credit: Each applicant's credit report will be requested and processed. Accounts must be in good standing with creditors. All applicants must score above the established level to be accepted. In the course of bankruptcy, good credit must be established since the bankruptcy.

Application Fee: A non-refundable $50.00 application fee will be submitted by the applicants.

Occupancy: No more than two occupants per bedroom in each home will be allowed. For instance:

- Two bedroom: Two (2) Persons
- Three bedrooms: Four (4) Persons
- Four Bedrooms: Six (6) Persons

Criminal History: A criminal background check will be performed on all occupants age 18 or over. Applications may be rejected for violent felony convictions. The following convictions reported on the criminal background checklist may result in denial of your application:

- Any violent felony Convictions - (time limit 10 years from the disposition date)
- Any Terrorism-related Convictions - (no time limit)
- Any Prostitution-related Convictions – (time limit 10 years from the disposition date)
- Any Sex-related Convictions including but not limited to, rape and child molestation (no time limit)
- Any Misdemeanor Crimes against a Person - (time limit 10 years from the disposition date)

Management makes every reasonable effort to attempt to verify each applicant's criminal background history provided by applicant. Management cannot guarantee all background checks will disclose all potential criminal history. Therefore, management may not be held liable for information not discovered during investigation.

Good Faith Deposit: A good faith deposit of $200.00 will be submitted along with the rental application(s) to reserve an available home/home site. Applicant(s) have 72 hours to cancel their application in writing and receive a full refund of their good faith deposit set forth above. Applications may take longer than 72 hours to verify based on the information provided by the applicant. Therefore, applicant(s) 72 hour written cancellation policy is not contingent upon the applicant(s) application being approved. If the applicant(s) application is denied, based on an applicant(s) not meeting Logan's Crossing leasing criteria, Logan's Crossing will refund, in full, the $200.00 good faith deposit within 30 days from the date of denial. Once the application has been approved, $200.00 of the good faith deposit is applied toward the security deposit for the home site. The security deposit is refundable, providing all provisions of the lease agreement are met upon the date of move-out.

Pets: Logan's Crossing has a "NO AGGRESSIVE BREEDS" policy. Dog breeds, and any mixes thereof, prohibited are Rottweiler, Doberman, German Shepard, Chow, and Pit Bull (including the American Staffordshire terrier, Staffordshire bull terrier and American Pit Bull terrier) and any other breed as designated by Management.

Recreational Vehicles: Utility trailers, boats and campers are prohibited from being parked at home site.

I/We have read and agree to the above criteria from which my/our application(s) will be approved. I/We specifically authorize and acknowledge that a **Credit Check and a Criminal Background Check will be performed**.

_____

Applicant Printed Legal Name

_____

Applicant Signature Date

_____

Co-Applicant Printed Legal Name

_____

Co-Applicant Signature Date

Logan's Crossing Manufactured Home Community

Application for Lot Rental

150 McPherson Parkway, Dallas, Georgia 30157

770-443-6170 Office and Fax

www.LogansCrossingMHC@gmail.com

*** Application fee of $50.00 must be paid before processing will begin**

Date of Application:	_____
Home site #:	_____
Application fee paid?	_____
Deposit paid?	_____
Photo Identification?	_____
Approval/Denial Date:	_____

Applicant

Name (First, Middle, Last)		Social Security Number
Have you ever been convicted of a felony? **NO** **YES** If yes, explain on separate sheet of paper		Birthdate(Month/Day/Year)
Driver's License # State Issued		# People to Occupy Home Adults Children
Present Street Address		
City, State, Zip		Home #
Email Address		Cell #
How long at present address?	Circle One: Own Rent Other	Monthly Payment $
Landlord Name		Landlord Phone
Previous Address(if less that 2 years at present address)		
City, State, Zip		How Long (Yr,Mo)
Amount paid per month $	Landlord Name Landlord Phone	

Applicant Employment

Employer		Phone Number
Address (City, State)		Supervisor
Job Title	Hire Date(Mo,Yr)	Gross Salary per: Wk/Mo/Yr $
Previous Employer(if less that 2 years)		Phone Number Supervisor
City,State		Employed From ,To (Mo,Yr)
Applicant Other Income: How long? $	Source: Per month	

Bank & Credit References

Checking Account with City State Phone	Account Number
Savings Account with City State Phone	Account Number

Co - Applicant

Name (First, Middle, Last)		Social Security Number
Have you ever been convicted of a felony? **NO** **YES** If yes, explain on separate sheet of paper		Birthdate(Month/Day/Year)
Driver's License # State Issued		Number of Dependents
Present Street Address		
City, State, Zip		Home #
Email Address		Cell #
How long at present address?	Circle One: Own Rent Other	Monthly Payment $
Landlord Name		Landlord Phone
Previous Address(if less that 2 years at present address)		
City, State, Zip		How Long (Yr,Mo)
Amount paid per month $	Landlord Name: Landlord Phone:	

Co - Applicant Employment

Employer		Phone Number
Address (City, State)		Supervisor
Job Title	Hire Date(Mo,Yr)	Gross Salary per: Wk/Mo/Yr $
Previous Employer(if less that 2 years)		Phone Number Supervisor
City,State		Employed From ,To (Mo,Yr)
Co-Applicant Other Income How long? $	Source: Per month	

Co - Applicant Bank & Credit References

Checking Account with City State Phone	Account Number
Savings Account with City State Phone	Account Number

Monthly Expenses and Obligations

Payment To and Phone Number	Account Number	Monthly Payment	Balance
1			
2			
3			
4			
5			

Have you declared bankruptcy in the last 10 years?	__Yes __No	When	Where
Have you ever had a repossession?	__Yes __No	When	Where
Have you ever been evicted from a rental residence?	__Yes __No	When	Where

Have you ever obtained credit under another name?
If so, name used:

Are you a co-signer, C-maker or Guarantor on a note/loan?
If so, who?

Are you liable for child support, alimony or maintenance payments?
If so, how much? $

Applicant References

Reference Name	Phone Number
Address, City, State, Zip	Relationship

Applicant Emergency Contact

Emergency Contact Name	Phone Number	
Complete Address, City, State, Zip	Email Address	
Name of Nearest Adult Relative not living with you	Relationship	
City, State, Zip	Phone Number	

Automobile Information #1

Make	Model
Year	Color
Tag Number	State Registered
Name on Title	Condition

Do you have a camper, boat or trailer that will be parked on the property? Y N

If yes, please explain: _____

Include car loans, student and personal loans, credit card debt, utilities, insurance of all types, child support, alimony and any other obligations

Payment To and Phone Number	Account Number	Monthly Payment	Balance
1			
2			
3			
4			
5			

Have you declared bankruptcy in the last 10 years?	__Yes __No	When	Where
Have you ever had a repossession?	__Yes __No	When	Where
Have you ever been evicted from a rental residence?	__Yes __No	When	Where

Have you ever obtained credit under another name?
If so, name used:

Are you a co-signer, C-maker or Guarantor on a note/loan?
If so, who?

Are you liable for child support, alimony or maintenance payments?
If so, how much? $

Applicant References

Reference Name	Phone Number
Address, City, State, Zip	Relationship

Co-Applicant Emergency Contact

Emergency Contact Name	Phone Number	
Complete Address, City, State, Zip	Email Address	
Name of Nearest Adult Relative not living with you	Relationship	
City, State, Zip	Phone Number	

Automobile Information #2

Make	Model
Year	Color
Tag Number	State Registered
Name on Title	Condition

Do you have any recreational vehicles that will be parked on the property? Y N

If yes, please explain: _____

Pet Information			Pet Information		
Indoor or outdoor animal (Circle One)		Type of animal	Indoor or outdoor animal (Circle One)		Type of animal
Name of animal		Breed	Type of animal		Breed
Age	Sex	Color	Age	Sex	Color
Weight		Height	Weight		Height

Occupant Information		Occupant Information		
Please list anyone who will be occupying the home:				
Name	Age	SSN:	Have you ever been convicted of a felony? Yes	No
Name	Age	SSN:	Have you ever been convicted of a felony? Yes	No
Name	Age	SSN:	Have you ever been convicted of a felony? Yes	No

I (We) certify that all statements made in this application are true and correct to the best of my knowledge and belief. I understand that any misrepresentations or omissions of facts in this application are grounds for disqualification from further consideration. I (We) hereby authorize Logan's Crossing and/or its agents to contact all references given in this application and to conduct a credit, conduct, and/or criminal background review, including obtaining my credit report from any authorized credit reporting agency.

I agree to pay the $50.00 non-refundable Application Fee at the time I submit this application. I understand that if I do not pay this fee at this time, processing will be delayed.

Applicant Printed Legal Name

Co - Applicant Printed Legal Name

Applicant Signature

Date

Co - Applicant Signature

Date

Office Use Only

Debt Ration Calculations

Income Details

Applicant Monthly Income _____

Co-Applicant Monthly Income _____

Other Income _____

Front End Ratio Inputs

Lot Rent _____

Home Payment _____

Home Insurance _____

Back End Ratio Payments

Monthly Car Payments _____

Monthly Student Loan Payments _____

Minimum Credit Card Payments _____

Other Committed Monthly Payments _____

Debt Ratio Calculation Results

Total Income _____

Monthly Housing Costs _____

Front End Debt Ratio _____ Must be 33% or lower

Total Monthly Committed payments _____

Back End Debt Ratio _____ Should be 43% or lower

Credit Score _____ _____

Background Check _____ _____

MANUFACTURED HOME DESCRIPTION AND SALES INFORMATION

New _____ Pre-owned _____ (Please check one)

Year of home: _____

Make & Model of home _____

Dimensions (Width x Length) _____

VIN/ Serial Number: _____

Retailer/Dealer: _____

Point of Contact: _____

Address: _____

Telephone number: _____

Email address: _____

Finance Company: _____

Monthly Home payment: $_____

Does this monthly payment include taxes and insurance? ---- Yes -----No

RENTAL HISTORY VERIFICATION FORM

To: _____ From: Anne C. Scott – General Manager

Fax: _____ Phone & Fax: 770-443-6170

Re: _____ Email: LogansCrossingMHC@gmail.com

Remarks:	Urgent	FYI	Reply ASAP	Please Comment

We are processing a credit application for the above referenced party/parties and have been informed by him/her that you are/were his/her landlord at their current/former address. Please be assured that the information supplied by you will be held in confidence.

You are authorized to release to LOGAN'S CROSSING MHC the information requested below.

Credit applicant(s)_____ Date _____

TO BE FILLED OUT BY LANDLORD ONLY

Please fax or email this completed form to: **Fax 770-443-6170** or LogansCrossingMHC@gmail.com as soon as possible.

Applicant(s): _____

Address: _____

Residency Dates From: _____ to _____

Monthly Rent: $ _____

FORM COMPLETED BY:

Name: _____

Title: _____

Email Address: _____

Phone Number _____

LEASE VIOLATIONS

YES	NO	Description
____	____	Late rent (_____ Times)
____	____	NSF Check (_____ Times)
____	____	Unauthorized Pets
____	____	Unauthorized Occupants
____	____	Property Damage
____	____	Other: _____
____	____	Proper Notice Given?
____	____	Would you re-rent to Applicant(s)
____	____	Current Address now?
____	____	Are you Family or Friend?

CONFIDENTIALITY NOTE: The information contained in the facsimile transmission and the document(s) that follow are for the exclusive use of the addressee and may contain information protected by the privacy act, 5U.S.C.522a, or otherwise confidential, privileged, or non-disclosable information. If the recipient of this facsimile is not the addressee, the recipient may violate the law by sending, photocopying, distributing, or otherwise using this facsimile transmission of its contents in any way. If the recipient has received this facsimile in error, call the office immediately.

EMPLOYMENT VERIFICATION FORM

To: _____ From: Anne C. Scott – General Manager

Fax: _____ Phone & Fax: 770-443-6170

Re: _____ Email: LogansCrossingMHC@gmail.com

Remarks:	Urgent	FYI	Reply ASAP	Please Comment

We are processing a credit application for the above referenced party/parties and have been informed by him/her that you are/were his/her employer at their current/former job. Please be assured that the information supplied by you will be held in confidence.

You are authorized to release to LOGAN'S CROSSING MHC the information requested below.

Credit applicant(s)_____ Date _____

TO BE FILLED OUT BY EMPLOYER ONLY

Please fax or email this completed form to: **Fax 770-443-6170** or LogansCrossingMHC@gmail.com as soon as possible.

Applicant(s): _____ Position: _____

Address: _____ Dates Employed From: _____ to _____

Name of Employer: _____ Salary per _____ $_____

Address: _____ Do you expect to retain them as an employee?

Employer Telephone & Fax: _____ _____ Yes _____ No

FORM COMPLETED BY:

Name: _____ Remarks: _____

Title: _____ _____

Email Address: _____ _____

Phone Number _____ _____

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EMPLOYMENT VERIFICATION FORM

To: _____ From: Anne C. Scott – General Manager

Fax: _____ Phone & Fax: 770-443-6170

Re: _____ Email: LogansCrossingMHC@gmail.com

Remarks:	Urgent	FYI	Reply ASAP	Please Comment

We are processing a credit application for the above referenced party/parties and have been informed by him/her that you are/were his/her employer at their current/former job. Please be assured that the information supplied by you will be held in confidence.

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Credit applicant(s)_____ Date _____

TO BE FILLED OUT BY EMPLOYER ONLY

Please fax or email this completed form to: **Fax 770-443-6170** or LogansCrossingMHC@gmail.com as soon as possible.

Applicant(s): _____ Position: _____

Address: _____ Dates Employed From: _____ to _____

Name of Employer: _____ Salary per _____ $_____

Address: _____ Do you expect to retain them as an employee?

Employer Telephone & Fax: _____ _____ Yes _____ No

FORM COMPLETED BY:

Name: _____ Remarks: _____

Title: _____ _____

Email Address: _____ _____

Phone Number _____ _____

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